U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 3793	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Denny Delk	Name American Federation of Television & Radio Arti
	Labor Organization File Number 000-030
P.O. Box, Bidg., Room No., if any Box 901	P.O. Box, Building and Room Number, if any 7th Floor
Street	Street 260 Madison Avenue
City Pacifica	City New York
State California ZIP Code + 4 94044-0901	State New York ZIP Code + 4 10016-2401
5. Position in labor organization. National Board, SF Local Pre-	sident
Enter appropriate data below if, during the past fiscal year, you or your spo (except as specified in the excl	ouse or minor child directly or indirectly had any of the following interests usions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizat	derived income or other economic benefit of ion represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	
State ZIP Code + 4	Equal control of the
the second secon	
Signature and verification. The undersigned declares, under penalty or	nature  f Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompan undersigned's knowledge and belief, true, correct, and complete. (See the se	ying documents), has been examined by the signatory and is, to the best of the action on penalties in the instructions.)
	региппинатиры формуничного под
Signed	On 1/4/2005 650 355 2262  Date Telephone Number
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thousand same state, it ally).	
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
	14 h Amount of courses
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a

substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name AFTRA Retirement Fund	a. Labor Organization
Trade Name, if any:	b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street 261 Madison Avenue	and the second s
City New York	
State New York ZIP Code + 4 10016-2495	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	The AFTRA Retirement Fund provides pension benefits to officers, employees and members of AFTRA, the labor organization. The approximate dollar value of
Trade Name, if any:	such dealing is not ressonably ascertainable by me.
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Reimbursement to trustee (Denny Delk) of expenses incurred in attending meetings of the board of trustees, committees of the board of trustees, educational seminars and conducting other trust fund business, including travel, food, lodging & registration.
	Andrew or survey and the second of the secon
	12.b. Amount. \$22,157
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

7

Street

City

State

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Assn. of Motion Picture & TV Producers  Trade Name, if any: AMPTP	a. Labor Organization
P.O. Box, Bldg., Room No., if any	b. Trust
Street 15503 Ventura Bl.	C. Employer
City Encino	
State California ZIP Code + 4 91436-3103	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Trade Name, if any:	The AMPTP negotiates collective bargaining agreements with AFTRA on behalf of entertainment industry employers. The AMPTP itself is not an employer of AFTRA members. The approximate dollar
P.O. Box, Bldg., Room No., if any	value of such dealing is not reasonably ascertainable by me.
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.  My wife and I enjoyed a movie and refreshments hosted by the AMPTP Director/IFEBP President (same person) during an IF meeting in Washington DC, at which IF employees and participants, including myself, were honored for our work in trustee education.
	12.b. Amount. \$60